

Client: Example Client ABC123  
123 Test Drive  
Salt Lake City, UT 84108  
UNITED STATES

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 1/28/1998  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Fungal Antibodies with Reflex to Blastomyces dermatitidis Antibodies by Immunodiffusion, Serum**

ARUP test code 3000235

**Coccidioides Antibody by CF** <1:2 (Ref Interval: <1:2)  
 INTERPRETIVE INFORMATION: Coccidioides Ab by Complement Fixation (CF)  
 Any titer suggests past or current infection. However, greater than 30 percent of cases with chronic residual pulmonary disease have negative Complement Fixation (CF) tests. Titers of less than 1:32 (even as low as 1:2) may indicate past infection or self-limited disease; anticoccidioidal CF antibody titers in excess of 1:16 may indicate disseminated infection. CF serology may be used to follow therapy. Antibody in CSF is considered diagnostic for coccidioidal meningitis, although 10 percent of patients with coccidioidal meningitis will not have antibody in CSF.

**Histoplasma Mycelia Antibodies by CF** **1:8 \*** (Ref Interval: <1:8)  
 INTERPRETIVE INFORMATION: Histoplasma Mycelia Antibodies by CF  
 A titer of 1:8 or greater is generally considered presumptive evidence of histoplasmosis. A titer of 1:32 or greater or rising titers indicate strong presumptive evidence of histoplasmosis. Cross reactions, usually at lower titers, may occur with other fungal diseases.

**Histoplasma Yeast Antibodies by CF** **1:64 \*** (Ref Interval: <1:8)  
 INTERPRETIVE INFORMATION: Histoplasma Yeast Antibodies by CF  
 A titer of 1:8 or greater is generally considered presumptive evidence of histoplasmosis. A titer of 1:32 or greater or rising titers indicate strong presumptive evidence of histoplasmosis. Cross reactions, usually at lower titers, may occur with other fungal diseases.

**Aspergillus Antibodies by CF** <1:8 (Ref Interval: <1:8)  
 INTERPRETIVE INFORMATION: Aspergillus Antibodies by CF  
 A titer of 1:8 or greater suggests Aspergillus infection or allergy. Cross-reactions with dimorphic fungi are not unusual within the genus Aspergillus.

**Blastomyces Antibodies EIA, SER** **1.9 IV H** (Ref Interval: <=0.9)

**H=High, L=Low, \*=Abnormal, C=Critical**

Unless otherwise indicated, testing performed at:

